

Future Generali India Insurance Company Ltd.

7th Floor, Unit No. 705 Ratan Square, 20 - A Vidhan Sabha Marg, Lucknow Lucknow - 226001,

Uttar Pradesh (State Code-09)

Ph: - Helpdesk No: 1800-220-233

GSTIN: 09AABCF0191R3Z5 IRDA Registration No: 132 CIN No: U66030MH2006PLC165287

PAN: AABCF0191R

Policy No. 132/14/01/0425/MTP/3310015522	IFICATE CUM INSURANCE POLICY SCHEDULE CUM PAYMENT RECEIPT Issued at: 10:06 Hours on 22/04/2024 [UIN:] Period of Insurance TP: 22/04/2024 (10:06 Hrs) To 21/04/2027 (Midnight)								Proposal No. & Date P28913758, 22/04/2024		
Insured's Address	MR. ANIL KUMAR RANA H.NO-514, KHURAMPUR 2, SAINIK NAGAR, P.S- KANKARKHERA TAHSHIL MEERUT - 250001 Uttar Pradesh (State Code-09)						GSTIN NA	Previous Policy No. NA			
Chassis No. MAKGN267BR4206584		Engine No. L15ZD2030972		Model CITY/1.5 RDE ZX CVT		Body Color Platinum White P.		Body Type Sedan	Previous Insurer		rer
Geographical Area India	Date of F 22/04/		e Mfg. Year 2024		Seating Cap. 5	Place of Registration Meerut		Fuel Type Petrol	Registration No.		
Vahida serses		INSUR	D'S DECL	ARED VALUE (I	Rs.)				- III - III - III - III		
Vehicle: 1556100 Electrical Accessories: 0			Non Electrical Accessorie		: 0	O Bi Fuel Kit:		NA	Total IDV: 1556100		100
- 2 Nov 1970 - 1970 - 1970 - 1970		S	CHEDULE	OF PREMIUM							
A,Own Damage Premium 3asic Premium			nt (Rs.)		B. Liability Premium					Amoun	nt (Rs.)
/ehide			Third Party Liability								
Von Electrical Accessories			14896 Basic Third Party Liability Premium including TPPD							10640	
Electrical Accessories (IMT-24)			0 Sub Total (Third Party Liability)								1064
Section Accessories (IPIT-24)			0 PA Cover							1111	
3i Fuel kit (IMT-25)			Compulsory PA Cover for Owner Driver Nominee: MRS. KAVITA TOMER (WIFE) (52Years)							975	
Basic Premium Total			14896 Optional PA cover for Paid Driver (IMT-17)							300	
Add Geographical Area Ext. (IMT-1)			0 Optional PA Cover (200000 Per Person) for 5 Persons (IMT-					-16)		1500	
Sub Total Deductibles			14896 Sub Total (PA Cover)								277
			Legal Liability								
/oluntary Deductibles (IMT-22A)			0	Paid Driver (IMT-28)						150	
Anti Theft Device (IMT-10) A Membership (IMT-8)			373 Employees (for 0 persons) (IMT-29)							0	
A Membership (IMT-8)			0	Sub Total (Legal Liability)							15
andicap (0%)				Geographical Are	a Ext.(TP)					0	
CB (0%)			0								
ub Total (Deductibles)			0								
dd-Ons (Engine Protect, Key Protect, Zero Depreciation)			373			-					
et Own Damage Premium(A)			11922								
ote:-			26445 Net Liability Premium(B)								1356!
Issue of Policy is subject to realisation of cheque if premium is paid by cheque.				Total Premium (A + B)							40010
Consolidated stamp duty paid to State Exchequer.			-	SGST(9%)					360:		
The Policy is subject to a compulsary deductible of Rs. 1000 (IMT-22)			-	CGST(9%)					360:		
			Gross Premium Paid om 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of i						47212		

Driver's Clause: Any person including the Insured: Provided that the person driving holds an effective and valid driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective learner's license may also drive the vehicle & that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

Limits of Liability: Limit of the amount of the Company's Liability Under Section II-1 (I) in respect of any one accident: as per motor vehicles act, 1988. Limit of the amount of the Company's Liability Under Section III-1 (II) in respect of any one claim or series of claims arising out of one event: UPTO Rs. 7,50,000.

Cover Under Section III for Owner-Driver is Rs. 15 lakhs.

No Claim Bonus: The insured is entitled for a No Claim Bonus (NCB) on the own damage section of the policy, if no claim is made or pending during the Preceding year-20%, Preceding two consecutive years-25%, Preceding three consecutive years-35% of NCB on OD Premium. No Claim Bonus only be allowed provided the policy is renewed with in 90 days of the expiry date of the previous policy.

HP/Lease/Hypothecation with: STATE BANK OF INDIA - LAKHIMPURI KHERI Subject to I.M.T Endt. Nos. & memorandum: 7,22 printed herein.

Grievance Clause: For resolution of any query or grievance, Insured may contact the respective branch office of the Company or send mail to https://general.futuregeneral.in/customer-service/grievance-redressal or visit https://general.futuregeneral.futuregeneral.futuregeneral.futuregeneral.futuregeneral.futuregeneral.futuregeneral.futuregeneral.futuregeneral.futuregeneral.futuregeneral.futuregeneral.futuregeneral.fu

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The insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reasons of wider terms appearing in the certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For legal interpretation, English version will hold

SAC: 997134, Description of Service: Motor Vehicle Insurance Services, Place of Supply: Uttar Pradesh (State Code-09), Invoice Number: 3310015522, Payment Receipt No: 3310015522, Payment mode: Cash I/we hereby certify that the policy to which this certificate relates as well as this certificate of insurance are issued in accordance with the provisions of Chapter X and Chapter XI of M.V. Act, 1988.

Broker Name: SMC Insurance Brokers Pvt. Ltd.

Broker Code: 289

Broker Contact No.:1800 2666 2666

Lontact Platinum Honda For Renewal-9756799915 9756799926 or Claim -9756700004

For & On Behalf of SERVICE
Future General Lindle Insurance
PLATINUM
LINDONDA
DILHI ROAD MEERUT